

CLAIMS ONLY							Application Number 09/845 498		Filing Date				
							Applicant(s)						
CLAIMS		AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
		Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep
1								51					
2								52					
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47								97					
48								98					
49								99					
50								100					
Total Indep								Total Indep					
Total Depend								Total Depend					
Total Claims								Total Claims					

$$\begin{array}{r} 18 \\ 24 \\ \hline 32 \end{array}$$

**BEST AVAILABLE COPY**